	ENT OF A CAMPAIGN	463-5800 F 173	1-800-325-8506 ORM JCTA				
See JCTA Instruction	1 Total pages file						
2 JUDICIAL CANDIDATE	MS/MRS/MR FIRST MI	OFFICE USE ONLY					
NAME	NICKNAME YVONNE M. SUFFIX WILLIAMS	Acct. # Date Received					
JUDICIAL CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY, STATE; ZIP CODE P. U. BOX 142248 Aus TIN, TEXAS 78714-2248	AS COUNTY TEX	HW 82435				
JUDICIAL CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (5/2) 913 - 9044	HD/PM O	S S				
OFFICE HELD	Associate Municipal Court Judge Muster	Date Imaged					
OFFICE SOUGHT	Justice of the Peace, PCT 1, TRAVIS	County	-				
CAMPAIGN TREASURER NAME	MS/MRS/MB FIRST MI NICKNAME ALBERT L. Black	LAST	SUFFIX				
CAMPAIGN TREASURER STREET ADDRESS (Residence or business	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #; CITY; STATE;	ZIP CODE AUSTIN					
GAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 339-4788						
CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. I am aware of my responsibility to file timely reports as required by Title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions						
	from corporations and labor organizations.	7 - 22 - 0 Date Signed	9				
	GO TO PAGE 2						

Texas Ethics Commis	sion P.O. Bo	X 12070 Au	stin, Texas 78/11-20/0	(512) 463-5800	1-800-325-8506
JUDICIAL I REGARDIN	 ·				FORM JCTA
ILOAIDII	IG LXI LIV	DiTORE			PG 2
JUDICIAL CANDIDATE NAME	TVONN	E M	ICHELLE	WILLIA	ms.
JUDICIAL DECLARATION OF INTENT REGARDING EXPENDITURE LIMITS	NOT CO	MPLY WITH		ATE'S INTENT TO RE LIMITS PRESC	
				a judicial candidate expenditures. Elec.	
	Please check	the appropriate bo	х.		
	I swear or affirm that I will voluntarily comply with the limits on expenditures prescribed by the Judicial Campaign Fairness Act.				
		•		end to comply with Judicial Campaign	
	9-22-0 Date	<u>09</u>	1X10	Signature of Candidate	Clams.
	AFFIR NO		blic TEXAS TEXAS THE PROPERTY OF THE PROPERTY	a, Willang this th	
	of Soptem	be , 20_		, witness my hand and se	al of office.
	Signature of administerin		Print name of a	officer	Title of officer